

Sexually Transmitted Diseases (Continued)

Human immunodeficiency virus (HIV)/Acquired immune deficiency syndrome (AIDS) – Unprotected sexual contact with infected person; contaminated needles or blood into an open cut/membrane of an infected member; rare cases could occur.

- Threat year-round; countrywide
- Symptoms – weight loss, night sweats, fatigue, swollen lymph glands, sores
- Very severe for individual; death likely

Prevention – Abstinence; latex condoms; not sharing needles; [hepatitis B vaccine](#)

Water Contact Diseases

[Schistosomiasis](#)– Wading or swimming in water contaminated with feces. An attack rate of less than 1 percent a month could occur.

- Threat year-round; countrywide
- Symptoms – fever, chills, nausea
- Hospitalization of 1–7 days

Prevention – Do not swim/wade in unapproved water; wash skin and clothing after exposure to freshwater streams/ponds.

Others – [Leptospirosis](#)

ENVIRONMENTAL RISKS

Short-term health risks

Water contaminated with fecal pathogens or raw sewage

Long-term health risks

Low-level chemical contamination of food

HAZARDOUS ANIMALS AND PLANTS

Venomous Snakes – At least 14 species widely distributed countrywide, including the boomslang snake, adders, burrowing asps, vipers, cobras, and garter snakes. Many have lethal venom; others can spit venom causing blindness. If bitten, seek urgent medical attention; wash venom from eyes immediately!

Prevention – Do not handle *any* snake; never walk barefoot.

HAZARDOUS ANIMALS AND PLANTS (Continued)

Large Reptiles and Mammals – In moist southern regions large pythons can inflict serious bites and have killed humans by constriction; crocodiles, monitor lizards, baboons and monkeys can deliver powerful bites; cheetahs, leopards, and lions will attack humans; hippos, elephants, and water buffalo cause numerous fatalities by trampling. Seek medical attention if bitten.

Prevention – Do not approach or disturb any reptile or mammal; use caution around watering holes and river/lake shorelines.

Scorpions and Spiders – Numerous in arid northern regions: some have potentially lethal venom. Recluse and widow spiders are common in moist, southern regions. Bites can be very painful or cause serious skin damage. Seek medical attention if bitten/stung.

Prevention – Shake out boots/bedding/clothing prior to use; never walk barefoot; avoid sleeping on the ground.

Hazardous Plants – Thorny plants that can puncture skin, produce rashes, and/or cause infections are common in arid regions; burning some plants can cause skin rashes and lung damage; some plants cause abnormal behavior/poisoning if chewed/eaten. Seek medical attention if injured or poisoned by plants.

Prevention – Do not touch, chew, eat, or burn unfamiliar plants; use clothing as a protective barrier for skin; wash contaminated skin/clothing after contact.

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Prepared by:

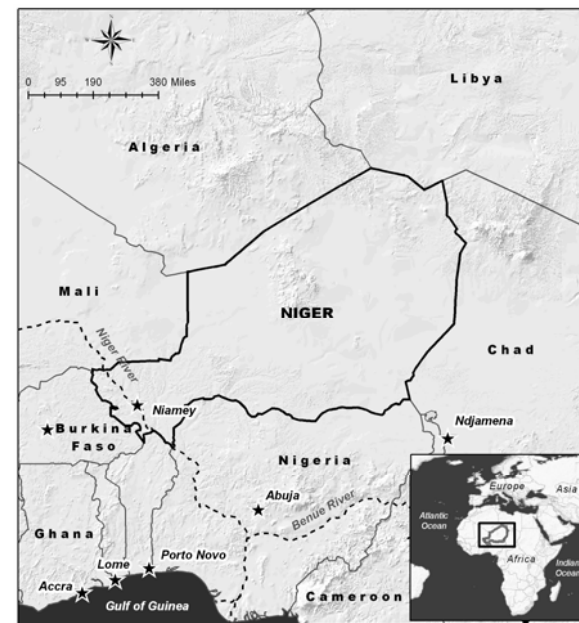


U.S. Army Center for Health Promotion & Preventive Medicine

<http://chppm-www.apgea.army.mil>
SIPRNet: <http://usachppm1.army.smil.mil>
(800) 222-9698/ DSN 584-4375/ (410) 436-4375

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DEPLOYMENT HEALTH GUIDE: NIGER



This country-specific guide should be used in conjunction with [GTA 08-05-062, U.S. Army Guide to Staying Healthy](#), and is intended to provide information that can help reduce your risk of Disease and Non-battle Injuries (DNBI) when deployed. This health threat and countermeasure information is based on the most current data available from U.S. Department of Defense medical agencies at the time of production. In addition to the information in this guide, you should also receive force health protection, health threat, and preventive medicine countermeasures training/ briefings prior to and, as required, throughout the length of your deployment.

NIGER OVERVIEW

Location – Niger is located in Western Africa, southeast of Algeria. Niger is slightly less than twice the size of Texas.

Climate – Hot, dry and dusty in the northern two-thirds of the country and tropical in the extreme south. Northeast Niger is one of the hottest regions on earth with daytime temperatures that often reach 122° F.

Rainfall – June through October is the rainy season, with annual precipitation of approximately 30 inches in the south and 8 inches of rain in the north.

Terrain – Predominately covered with desert plains and sand dunes; flat to rolling plains in the south and hills in the northwest

Forces of Nature – Extreme heat, drought and flooding

RISK ASSESSMENT

Niger is at **VERY HIGH RISK*** for infectious diseases, with an overall disease risk among the worst in the world. Without force health protection measures, mission effectiveness will be seriously jeopardized.

*Based on a combination of all major infectious diseases that occur in a country, the Armed Forces Medical Intelligence Center (AFMIC) assigns an **overall country risk level** of low, intermediate, high, or very high risk, as compared to other countries.

INFECTIOUS DISEASES

Food-borne and Water-borne Diseases

Consuming contaminated food, water, or ice

Diarrhea, bacterial – A potential attack rate of 100 percent a month if local food, water or ice is consumed

- Threat – year-round; countrywide
- Symptoms – loose, watery or explosive bowel movements
- Recovery of 1–3 days with antibiotics

Diarrhea, protozoal – A potential attack rate of 1 to 10 percent a month if local food, water or ice is consumed

- Threat year-round; countrywide
- Symptoms – loose, watery or explosive bowel movements
- Recovery of 1–3 days with antibiotics

Food-borne and Water-borne Diseases (Continued)

Hepatitis A – A potential attack rate of 1 to 10 percent a month among unvaccinated personnel consuming local food, water or ice

- Threat year-round; countrywide
- Symptoms – none to flu-like illness
- Severe, 1–4 weeks recovery, sometimes initially requiring hospitalization

Typhoid/Paratyphoid fever – A potential attack rate of 1 to 10 percent a month among unvaccinated personnel consuming local food, water or ice

- Threat year-round; countrywide
- Symptoms – fever, constipation, headache
- Hospitalization of 1–7 days

Prevention – Consume only U.S. military-approved food, water, ice; take **hepatitis A vaccine** and/or **typhoid vaccine** if directed by medical authority.

Vector-borne Diseases

Greatest concern:

Malaria – High number of cases possible

- Transmission – night-biting mosquitoes
- Threat year-round, especially during rainy season; risk countrywide, but lower in northern areas
- Symptoms – debilitating fever, chills, sweats; headache, cough, diarrhea, respiratory distress; shock, coma and death in severe cases
- Hospitalization 1 -7 days likely; prolonged recovery or death possible

Others: Rare cases to epidemic potential:

Boutonneuse fever (spotted fever group rickettsiosis; tick-borne); **Chickungunya** (mosquito-borne); **Crimean-Congo hemorrhagic fever** (tick-borne); **dengue fever** (mosquito-borne); **leishmaniasis** (cutaneous, sand fly-borne); **Rift Valley fever** (mosquito-borne); **Sindbis (Ockelbo) virus** (mosquito-borne); **West Nile fever** (mosquito-borne); **yellow fever** (mosquito-borne)

Prevention – **DEET** on exposed skin; **permethrin-treated uniforms**; **permethrin-treated bed nets**; **malaria prevention pills**, if prescribed (CRITICAL); **yellow fever vaccine**, if prescribed

Animal Contact Diseases

Rabies – Exposure to virus-laden saliva of an infected animal through a bite, scratch, or breathing airborne droplets; risk is well above U.S. levels.

- Threat year-round; countrywide
- Initial symptoms – pain, tingling, or itching from bite site, chills, fever, muscle aches
- Death likely in the absence of postexposure prophylaxis

Prevention – Avoid all animals; if scratched or bitten, seek medical attention immediately. Get preexposure and/or postexposure vaccinations if prescribed by medical authority.

Others – **Q fever**, **anthrax**

Respiratory Diseases

Meningococcal meningitis – This disease is usually caused by a viral or bacterial infection. It is spread through the exchange of respiratory droplets or saliva of an infected person (coughing, sneezing, sharing eating utensils or drinking glasses).

- A small number of cases could occur among unvaccinated personnel who have close contact with infected or colonized individuals.
- Threat year-round; countrywide
- Symptoms – fever, sudden severe headache, stiff neck, rash, nausea and vomiting
- May result in blindness, hearing loss, mental retardation, loss of limbs or death

Prevention – Washing hands thoroughly after exposure to respiratory secretions and after toileting. Do not share utensils or glasses. Persons should cover their mouths and noses when coughing and sneezing. Take **meningococcal vaccine** if recommended by a medical authority.

Others – **Tuberculosis**

Sexually Transmitted Diseases

Hepatitis B – Unprotected sexual contact with infected person; contact with infected blood/body fluids. A small number of cases are possible.

- Threat year-round; countrywide
- Symptoms – jaundice, fatigue, nausea
- Recovery 1–4 weeks; occasional hospitalization; possible permanent liver damage